#### INSTRUCTIONS FOR MONROE COUNTY SHIP SEWER HOOK-UP APPLICATION

Thank you for your interest in the Monroe County Sewer Connection Program funded by the State Housing Initiative Program (SHIP). Please read this instruction sheet carefully and then complete the entire application. The information you provide is required to process your application and to determine your eligibility.

# Applicant/Head of Household Information

Please enter the name Head of Household and provide the address for the property that is to be connected to the sewer main. If the mailing address is different than the property address, please complete the line titled "Mailing Address (if different from property address)." Also, enter the Alternate Key Number (if known) for your property. The Alternate Key Number can be found using the following website: <a href="http://mcpafl.org/PropSearch.aspx">http://mcpafl.org/PropSearch.aspx</a>

The application also requires that you indicate whether you rent or own your property (please use the space provided to include this information) Also, indicate the amount of your monthly mortgage payment or monthly rent payment. On the next line enter your phone number and if available, an e-mail address. This will allow us to contact you if additional information or clarification is needed during our review process.

Please us the space provided to indicate if you live in the unincorporated portion of Monroe County, or if you live in the incorporated communities of Key West, Marathon, or Islamorada.

# **Property Owner Information**

If the property owner information is different than the applicant (i.e., for a rental property) please provide the name, mailing address, phone number and e-mail address of the property owner. Also, please provide the name and address of the mortgage holder, if applicable.

Please list the name, age, and sex for each household member, including their relationship to the Head of the Household (i.e., daughter).

# **Household Assets Information**

Please list all of your household assets such as bank accounts, money markets, retirement accounts, certificates of Deposits or other. Please list these assets by the household member name and include the name of the financial institution. In the second column, please describe the asset by type, such as, bank account, MM, CD, IRA, etc. In the third column, list the value of each asset (current balance or worth). Please provide a total amount for all assets at the bottom of the table. Please provide the first page of the most recent bank/asset statement to support that information.

### Household Annual Income Information (Please provide 2017 income information)

Please list the annual (yearly) incomes of all household members. The application requires that you provide the amounts earned from each potential income source (i.e., salary, business income, pension, social security, etc.) Enter the total annual income earned by each member of the household at the bottom of the table. Please try to make information legible and provide income amounts on a yearly basis, not monthly. If you are unemployed, please indicate the source of your living expenses. (Examples: W2, Self-Employed Profit/Loss, Social Security and Pension statements; if the household receives Rental income: provide income and expense information, etc. – contact the office if there are questions.)

#### **Sources of Income Verification Information**

Please list sources where, if necessary, your income information can be verified. List your name, your job title, name of your employer, their business address and phone number(s). Also, list the dates worked (or still work). If you are self-employed, please list the name of your business and indicate that you are self-employed.

# **HUD – Housing and Urban Development Requirements**

HUD requires that we gather demographic information for statistical purposes. Please put a check mark in the line that most closely reflects your background information. All of this information is to be completed for the Head of the Household. Also, please indicate if the Head of Household is elderly, disabled, female head of household or of Hispanic Ethnicity (check all that apply). Please note that this section is optional and will have no effect on your application, but we would appreciate having the information.

### **Application Certification Form**

Please read this information carefully - this a certification that the information you are providing on this application is true and correct. The top portion should be signed by the applicant – Head of Household. The following section should be signed by **ALL other Adult Household Members AND anyone receiving income** as shown elsewhere on this application.

### **Conflict of Interest Statement**

A Conflict of Interest Statement <u>signed by ALL Adult Household members</u> must be submitted with your application. The application cannot be processed without a signed Conflict of Interest Statement. You can obtain the current Conflict of Interest Statement form from Monroe County's website <a href="http://monroecounty-fl.gov/index.aspx?NID=402">http://monroecounty-fl.gov/index.aspx?NID=402</a> or by calling Monroe County Social Services at 305-292-4408.

# **Other Instructions and Information**

Please note that you must provide a legible copy of your picture identification care (i.e., driver's license). The picture identification card is required for the applicant — Head of Household, and other adults in the household. The application cannot be processed with copies of picture identification cards for ALL adult household members, so please remember to include them with your application.

This program is designed to serve household and individuals that are of low and moderate income. HUD provides the income levels each year by household size. Once you have totaled your annual household income, you may refer to this table to determine if you are income eligible for the program. For example, a four person household in Monroe County must earn less than \$70,550 annually to qualify for this program. If your total household income is higher than \$70,550, you would not be eligible to participate in the program. Similarly, a two person household in Monroe County is required to earn less than \$56,450 to be income eligible and participate in the program. **The 2018 Monroe County income limits** (provided by HUD) are listed in the table below.

Family Size	1 person	2 People	3 People	4 People	5 People	6 People	7 People	8 People
Income Limits (80% AMI)	\$49,400	\$56,450	\$63,500	\$70,550	\$76,200	\$81,850	\$87,500	\$93,150

Again, thank you for your interest in the Monroe County Sewer Connection Program. Please read and fill out the application carefully and correctly. If you have any questions while completing the application, please contact Monroe County Social Services at (305) 292-4408.

Reminder: Please provide a photo I.D. of all household members over the age of 18

Please sign all documents, including the Conflict of Interest Form.

Please include a copy of the previous year's Tax Return.

Prior expenditures for sewer connections are not eligible for reimbursement.